

County: La Crosse
 BETHANY - RIVERSIDE
 2575 SOUTH 7TH STREET

LA CROSSE 54601 Phone: (608) 796-8200
 Operated from 1/1 To 12/31 Days of Operation: 365
 Operate in Conjunction with Hospital? No
 Number of Beds Set Up and Staffed (12/31/01): 123
 Total Licensed Bed Capacity (12/31/01): 123
 Number of Residents on 12/31/01: 121

Facility ID: 1760

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Ownership:
 Highest Level License:
 Operate in Conjunction with CBRF? No
 Title 18 (Medicare) Certified? Yes
 Title 19 (Medicaid) Certified? Yes
 Average Daily Census: 120

Nonprofit Church/Corporation
 Skilled
 No
 Yes
 Yes
 120

Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/01)				Length of Stay (12/31/01)			
		Primary Diagnosis	%	Age Groups	%				%
Home Health Care	No					Less Than 1 Year	38.8		
Supp. Home Care-Personal Care	Yes					1 - 4 Years	49.6		
Supp. Home Care-Household Services	Yes	Developmental Disabilities	1.7	Under 65	5.0	More Than 4 Years	11.6		
Day Services	No	Mental Illness (Org./Psy)	42.1	65 - 74	8.3				
Respite Care	No	Mental Illness (Other)	3.3	75 - 84	33.9				100.0
Adult Day Care	Yes	Alcohol & Other Drug Abuse	0.0	85 - 94	46.3	*****			
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	6.6	Full-Time Equivalent			
Congregate Meals	No	Cancer	1.7			Nursing Staff per 100 Residents			
Home Delivered Meals	No	Fractures	1.7		100.0	(12/31/01)			
Other Meals	Yes	Cardiovascular	7.4	65 & Over	95.0				
Transportation	Yes	Cerebrovascular	11.6			RNs	16.0		
Referral Service	No	Diabetes	1.7	Sex	%	LPNs	9.2		
Other Services	Yes	Respiratory	3.3			Nursing Assistants,			
Provide Day Programming for		Other Medical Conditions	25.6	Male	24.0	Aides, & Orderlies			
Mentally Ill	No			Female	76.0				
Provide Day Programming for			100.0						
Developmentally Disabled	No				100.0				

Method of Reimbursement

Table 1: Breakdown of Care Services by Funding Source																				
Level of Care	Medi care (Title 18)			Medi caid (Title 19)			Other		Private Pay			Family Care		Managed Care			Total Resi - dents	% Of All		
	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%			Per Di em (\$)	
Int. Skilled Care	0	0.0	0	2	2.7	124	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	2	1.7	
Skilled Care	6	100.0	338	69	93.2	106	0	0.0	0	38	95.0	163	0	0.0	0	1	100.0	397	114	94.2
Intermediate	---	---	---	3	4.1	88	0	0.0	0	2	5.0	150	0	0.0	0	0	0.0	0	5	4.1
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	6	100.0		74	100.0		0	0.0		40	100.0		0	0.0		1	100.0		121	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/01				
				% Needing Assistance of One Or Two Staff	% Totally Dependent	Total Number of Residents
Percent Admissions from		Activities of	%			
Private Home/No Home Health	14.9	Daily Living (ADL)	Independent			
Private Home/With Home Health	12.4	Bathing	0.0	16.5	83.5	121
Other Nursing Homes	3.6	Dressing	6.6	70.2	23.1	121
Acute Care Hospitals	52.6	Transferring	17.4	56.2	26.4	121
Psych. Hosp. -MR/DD Facilities	0.0	Toilet Use	12.4	32.2	55.4	121
Rehabilitation Hospitals	0.0	Eating	36.4	52.9	10.7	121
Other Locations	16.5	*****				
Total Number of Admissions	194	Continence	%	Special Treatments		%
Percent Discharges To:		Indwelling Or External Catheter	10.7	Receiving Respiratory Care		0.8
Private Home/No Home Health	14.5	Occ/Freq. Incontinent of Bladder	32.2	Receiving Tracheostomy Care		0.0
Private Home/With Home Health	14.0	Occ/Freq. Incontinent of Bowel	20.7	Receiving Suctioning		0.0
Other Nursing Homes	4.1			Receiving Ostomy Care		3.3
Acute Care Hospitals	9.8	Mobility		Receiving Tube Feeding		0.8
Psych. Hosp. -MR/DD Facilities	0.0	Physically Restrained	0.0	Receiving Mechanically Altered Diets		33.9
Rehabilitation Hospitals	0.0					
Other Locations	10.9	Skin Care		Other Resident Characteristics		
Deaths	46.6	With Pressure Sores	6.6	Have Advance Directives		67.8
Total Number of Discharges		With Rashes	6.6	Medications		
(Including Deaths)	193			Receiving Psychoactive Drugs		68.6

Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Nonprofit Peer Group Ratio %	Bed Size: 100-199 Peer Group Ratio %	Licensure: Skilled Peer Group Ratio %	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	97.6	89.4	1.09	83.8	1.16	84.3
Current Residents from In-County	86.8	82.7	1.05	84.9	1.02	82.7
Admissions from In-County, Still Residing	19.6	25.4	0.77	21.5	0.91	21.6
Admissions/Average Daily Census	161.7	117.0	1.38	155.8	1.04	137.9
Discharges/Average Daily Census	160.8	116.8	1.38	156.2	1.03	139.0
Discharges To Private Residence/Average Daily Census	45.8	42.1	1.09	61.3	0.75	55.2
Residents Receiving Skilled Care	95.9	93.4	1.03	93.3	1.03	91.8
Residents Aged 65 and Older	95.0	96.2	0.99	92.7	1.02	92.5
Title 19 (Medicaid) Funded Residents	61.2	57.0	1.07	64.8	0.94	64.3
Private Pay Funded Residents	33.1	35.6	0.93	23.3	1.42	25.6
Developmentally Disabled Residents	1.7	0.6	2.64	0.9	1.88	1.2
Mentally Ill Residents	45.5	37.4	1.22	37.7	1.21	37.4
General Medical Service Residents	25.6	21.4	1.20	21.3	1.20	21.2
Impaired ADL (Mean)	62.8	51.7	1.21	49.6	1.27	49.6
Psychological Problems	68.6	52.8	1.30	53.5	1.28	54.1
Nursing Care Required (Mean)	6.5	6.4	1.02	6.5	1.00	6.5